

PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: **Mail**

**Mail Stop ISSUE FEE
Commissioner for Patents
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(703) 746-4000**

or Fax

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000110 7590 03/28/2005

DANN, DORFMAN, HERRELL & SKILLMAN
1601 MARKET STREET
SUITE 2400
PHILADELPHIA, PA 19103-2307

07/01/2005 FFANAIAS 00000044 09894817

01 FC:1501	1400.00 OP
02 FC:1504	300.00 OP
03 FC:8001	30.00 OP

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
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09/894,817	06/28/2001	Ji-Woong Lee	1462-P02610US0	3380
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TITLE OF INVENTION: METHOD OF SUPPORTING SMALL GROUP MULTICAST IN MOBILE IP

Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.

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I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (703) 746-4000, on the date indicated below.

Joan Rodgers	(Depositor's name)
<i>Joan Rodgers</i>	(Signature)
June 28, 2005	
(Date)	

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1400	\$300	\$1700	06/28/2005
EXAMINER		ART UNIT	CLASS-SUBCLASS		
WONG, BLANCHE		2667	370-338000		

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

- Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
 "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. **Use of a Customer Number is required.**

2. For printing on the patent front page, list

- (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,
(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

Dann, Dorfman, Herrell
and Skillman, P.C.

2 Henry H. Skillman

3

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

KTFreetel Co., Ltd.

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Seoul, Republic of Korea

Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity Government

4a. The following fee(s) are enclosed:

4b. Payment of Fee(s):

- Issue Fee
 Publication Fee (No small entity discount permitted)
 Advance Order - # of Copies 10

A check in the amount of the fee(s) is enclosed.

Payment by credit card. Form PTO-2038 is attached.

The Director is hereby authorized to charge the required fee(s), or credit any overpayment, to Deposit Account Number 04-1406 (enclose an extra copy of this form).

5. Change in Entity Status (from status indicated above)

a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.

b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

The Director of the USPTO is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above. NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office.

Authorized Signature Henry H. Skillman

Date June 28, 2005

Typed or printed name Henry H. Skillman

Registration No. 17,352

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

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DANN, DORFMAN, HERRELL AND SKILLMAN

A PROFESSIONAL CORPORATION

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PHONE (215) 563-4100 • FAX (215) 563-4044

June 28, 2005

Last Name of First Named Inventor: **MAIL STOP ISSUE FEE**
LEE

Application No. 09/894,817 Allowed: March 28, 2005

Attorney Docket No. 1462-P02610US0 Confirmation No: 3380

Filed: June 28, 2001

**For: Method Of Supporting Small
Group Multicast In Mobile Ip**

TO THE COMMISSIONER FOR PATENTS:

SUBMISSION OF ISSUE FEE

The above-identified application has been allowed. In response to the Notice of Allowability dated March 28, 2005, enclosed are the following:

1. A copy of form PTOL-85 with authorization to charge Deposit Account No. 04-1406.
2. Fee Transmittal Sheet
3. Check in the amount of \$1730, which includes the issue fee, the publication fee and the cost of ten (10) advance copies.
4. Notification of Fee Address

Respectfully submitted,

DANN, DORFMAN, HERRELL AND SKILLMAN
A Professional Corporation
Attorneys for Applicants

By


Henry H. Skillman
PTO Registration No. 17,352



FEE TRANSMITTAL

<i>Complete if known</i>	
Application Number: 09/894,817	
Filing Date: June 28, 2001	
First Named Inventor: LEE	
Group Art Unit: 2667	
Examiner Name: Wong, Blanche	
Total Amt. of Payment: (1)+(2)+(3)= \$1,730	Attorney Docket Number: 1462-P02610US0

METHOD OF PAYMENT (check one)	FEE CALCULATION (continued)													
1. The Commissioner is hereby authorized to: <input type="checkbox"/> Charge indicated fees <input checked="" type="checkbox"/> Charge additional fees <input type="checkbox"/> Credit overpayments to the account of DANN, DORFMAN, HERRELL & SKILLMAN Deposit Account Number <u>04-1406</u>	ADDITIONAL FEES Fee Description Fee Paid Surcharge-late filing fee or oath _____ Surcharge - late provisional filing fee or cover sheet _____ Extension for response within first month _____ Extension for response within second month _____ Extension for response within third month _____ Extension for response within fourth month _____ Notice of Appeal _____ Filing a brief in support of an appeal _____ Request for oral hearing _____ Petition to revive unavoidably abandoned application _____ Petition to revive unintentionally abandoned application _____ Issue fee <u>1400</u> Petitions to the Commissioner _____ Petitions related to provisional applications _____ Submission of Information Disclosure Stmt. _____ Recording each patent assignment per property _____ Other fee (specify) <u>Advance Order (10 copies)</u> <u>30</u> Other fee (specify) <u>Publication Fee</u> <u>300</u> SUBTOTAL (3) \$1,730													
FEE CALCULATION 1. FILING FEE <table> <thead> <tr> <th>Fee Description</th> <th>Fee</th> </tr> </thead> <tbody> <tr> <td>Utility filing fee</td> <td>_____</td> </tr> <tr> <td>Design filing fee</td> <td>_____</td> </tr> <tr> <td>Plant filing fee</td> <td>_____</td> </tr> <tr> <td>Reissue filing fee</td> <td>_____</td> </tr> <tr> <td>Provisional filing fee</td> <td>_____</td> </tr> </tbody> </table> SUBTOTAL (1) \$0			Fee Description	Fee	Utility filing fee	_____	Design filing fee	_____	Plant filing fee	_____	Reissue filing fee	_____	Provisional filing fee	_____
Fee Description	Fee													
Utility filing fee	_____													
Design filing fee	_____													
Plant filing fee	_____													
Reissue filing fee	_____													
Provisional filing fee	_____													
2. Claims	Paid	Extra												
Total Claims		= 0												
Independent Claims	x	= 0												
Multiple Dependent (First presentation)														
	SUBTOTAL (2) _____													

Submitted By:

Typed or

Printed Name Henry H. Skillman Reg. Number 17,352

Signature Henry H. Skillman Date June 28, 2005 Deposit Account User ID 04-1406